

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number
10-123456789

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<i>15</i>	<input checked="" type="checkbox"/>
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>12</i>	minus 20 = <i>*</i> <input type="checkbox"/>
INDEPENDENT CLAIMS	<i>12</i>	minus 3 = <i>*</i> <input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT	<input checked="" type="checkbox"/>	<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>*</i>	Minus	<i>**</i>	<i>=</i>
Independent	<i>*</i>	Minus	<i>***</i>	<i>=</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

**SMALL ENTITY
TYPE**

RATE	Fee
BASIC FEE	370.00
X\$ 9=	<input type="checkbox"/>
X42=	<input type="checkbox"/>
+140=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

**OTHER THAN
OR
SMALL ENTITY**

RATE	Fee
BASIC FEE	740.00
X\$18=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>*</i>	Minus	<i>**</i>	<i>=</i>
Independent	<i>*</i>	Minus	<i>***</i>	<i>=</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X42=	<input type="checkbox"/>
+140=	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>

**OTHER THAN
OR
SMALL ENTITY**

RATE	ADDI- TIONAL FEE
X\$18=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL ADDITIONAL FEE	<input type="checkbox"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	<i>*</i>	Minus	<i>**</i>	<i>=</i>
Independent	<i>*</i>	Minus	<i>***</i>	<i>=</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE

ADDI- TIONAL FEE
X\$ 9=
X42=
+140=
TOTAL ADDITIONAL FEE

RATE

ADDI- TIONAL FEE
X\$18=
X84=
+280=
TOTAL ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.